Pittsylvania County Public Library System Young Adult Volunteer Application & Guidelines

Please complete both sides of this application so that we can discover more about you, your interests, your skills, and your intentions in volunteering with us.

Name							
Address							
Telephone Emergency	Name:	ne: Telephone:					
Contact:	- · · · · · · · · · · · · · · · · · · ·						
How did you	hear about ou	r volunteer pro	ogram?				
·	availability:	□ Weekly □ School year on		mer only DATE:			
Please indica	te the times of	day you will be	e available to v	olunteer:			
Mon	Tues	Wed	Thurs	Fri	Sat		
What would	you like to do	while volunteer	ring with us?				
☐ Assist with s reading	summer Ass	ist with Children	's Programs	Assist with Spe	cial Events		
□ Shelf mainte	nance She	lving					
Other (please l	ist):						
What school	l do you attend?Grade?						
Signature:	Date:						
Please print	your name:						
To be comple	eted by parent	/legal guardian	for volunteers	under age 18:			
Dateas a voluntee		vania County I] has my permi System.	ssion to work		

Young Adult Volunteer Guidelines

- Young adult volunteers must be between 13 and 17 years old to work at the Pittsylvania County Public Library.
- A parent or legal guardian must sign the applications, giving permission for the youth to work here.
- Youth volunteers are responsible for arranging their own transportation to and from the Library.
- Library etiquette is to be followed. This includes
 - No running, shouting, or other distractions while on library property.
 - Friends should not join you or call you on the phone while you are working.
 - Appropriate dress is required. Ask the staff supervisor for more information.
 - No food or drink.
 - Cell phones must be turned off while you are volunteering.
- Please call the library if you are unable to come in on a day you are scheduled to volunteer.
- Sign in with the staff member supervising you.

I have read and understand the vouth volunteer guidelines:

- Work assignments will be available for you each day you volunteer. Please ask if you need more direction to complete your tasks.
- Please let the staff know when you have finished your time and are leaving.

We are happy you have decided to volunteer at the library and hope this will be an enjoyable experience for you. Please sign below, indicating you agree to these guidelines. A copy of this agreement will be given to you for future reference.

	-	Č		
Signature			Date	
Digitature			Date	
Please print name				
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